



NOTICE OF CANDIDACY (Non- PARTISAN)

2011 Municipal Election  
Election Year Municipal/County

For the office of: SOUTHERN PINES MAYOR

Date: 07/15/2011 Candidate ID: 1H4784

I hereby file notice as a candidate for election to the office of SOUTHERN PINES MAYOR in the  
MOORE Election to be held on 11/08/2011 in MOORE County.

I request that my name appear on the ballot as follows:

Chris Smithson

Please print or type name above

920 N SAYLOR ST SOUTHERN PINES, NC 28387

Residential Address: (Street, City, ZIP)

920 N SAYLOR ST SOUTHERN PINES, NC 28387

Mailing Address if different (POB, City, Zip)

Home: (910) 692 - 9766 Cell: ( ) - - Business: ( ) - -

Check "YES" or "NO" I swear to the following to be true, correct, and complete to the best of my knowledge or belief.

YES NO

Have you ever been convicted of a felony? (Felony conviction need not be disclosed if the conviction was dismissed as a result of reversal on appeal or resulted in a pardon of innocence or expungement.)

If you have been convicted of a felony, you are required to complete the "Candidate Felony Disclosure" form within 48 hours of submitting this notice. GS § 163-106

Signature of Candidate (legal name)

Certification of Notice of Candidacy

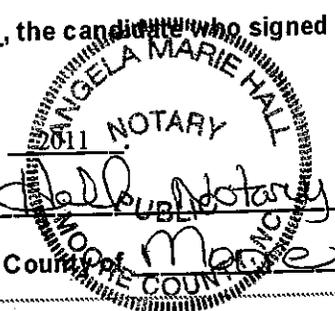
I hereby certify that Chris Smithson, the candidate who signed above, personally appeared before me this day and signed in my presence.

Sworn and subscribed before me this 15<sup>th</sup> day of July, 2011

Title and signature of certifying Officer:

Angela Marie Hall Notary

My commission expires: 1-28-12 State of North Carolina, County of MOORE



Verification by County Board of Elections

The undersigned has examined the voter registration records in MOORE County and found CHRISTOPHER SMITHSON to be a registered voter in the municipality/county of Moore

County Chairman, Secretary or Director: Glenda M. Lenderick 7-15-11  
Signature and date

The Notice of Candidacy must be signed in the presence of the chairman, secretary or director of the Board of Elections with which he/she files or a candidate may have his/her signature on the Notice of Candidacy acknowledged and certified to by any officer authorized to administer an oath. (See NCGS § 163-294.2.) In signing his/her notice of candidacy the candidate may use a nickname provided the candidate complies with the requirement specified in GS § 163-106 and GS § 163-323(a).

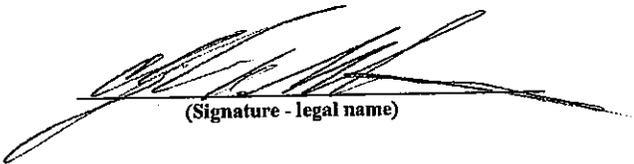
Information about the powers, duties, and responsibilities of city and county elective offices in North Carolina is available from the School of Government of the University of North Carolina at Chapel Hill at www.sog.unc.edu/programs/cceo. The School of Government provides training, research, and consultation for state and local government officials and citizens.

# Affidavit Attesting to Nickname (NCGS § 163-106(a))

I, CHRISTOPHER SMITHSON have been duly sworn, hereby state under oath that I have been  
(Legal name)  
commonly known by the nickname, CHRIS, for at least five years and  
request that my name be placed on the ballot as follows: Chris Smithson  
(Name to appear on ballot)

In the event that another candidate with the same last name as mine files notice of candidacy for  
the same office for which I am a candidate, my name should be listed on the ballot as follows:

Christopher Smithson - Chris  
(Legal name and nickname)

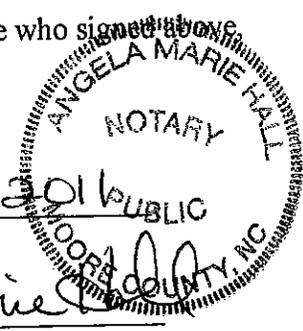
  
(Signature - legal name)

I hereby certify that Chris Smithson, the candidate who signed above,  
personally signed in my presence.

Sworn to and subscribed before me this 15 day of July, 2011 PUBLIC

Notary  
Title of Certifying Officer

Angela Marie Hall  
Signature of Certifying Officer



My commission expires: 1-28-12

Amendment  
 Yes  No

### Statement of Organization - Candidate Committee

Use this form to create a new or update an existing candidate committee.

This form must be accompanied by forms CRO-3100 and CRO-3500 (when amending, only re-submit if applicable).

1. Committee Information			
a. Full Name		c. ID Number	
Smithson for Mayor			
b. Mailing Address (include City, State and Zip Code)		d. Date Organized	
920 N Saylor St Southern Pines, NC 28387		7-15-11	
		e. Phone Number	
		910-692-9766	
2. Candidate Information <input type="checkbox"/> Candidate's Primary Committee			
a. Full Name		e. Candidate ID Number	f. Party Affiliation
Chris Smithson			Non <small>(Indicate Non-partisan if applicable)</small>
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought	
920 N Saylor St Southern Pines, NC 28387		Mayor - Southern Pines	
c. Phone Number	d. Email Address	h. Next Election Year	i. Jurisdiction
910-692-9766	chris@chrissmithson.com	2011	Southern Pines
<input checked="" type="checkbox"/> Email copy of notices			
3. Treasurer Information		4. Custodian of Books Information	
a. Full Name		a. Full Name	
Chris Smithson		Candidate	
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)	
920 N Saylor St Southern Pines, NC 28387			
c. Phone Number	d. Email Address	c. Phone Number	d. Email Address
910-692-9766	Chris@chrissmithson.com		
I prefer to receive notices by email <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Email copy of notices			
5. Assistant Treasurer Information		6. Account Information <small>(incl. CRO-3500)</small>	
a. Full Name		a. Financial Institution Full Name	
		State Employees Credit Union	
b. Mailing Address (include City, State, and Zip Code)		b. Purpose	
		Campaign Operations	
c. Phone Number	d. Email Address	c. Account Code	d. Type
		1	Checkings
<input type="checkbox"/> Email copy of notices			
CERTIFICATION			
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.			
Chris Smithson			
Printed Name of Signer		Signature of Appointed Treasurer	
		7-15-11	
		Date	



North Carolina  
State Board of Elections  
506 N Harrington Street  
Raleigh, NC 27603

Kimberly Westbrook-Strach  
Deputy Director - Campaign Reporting

Mailing Address  
PO Box 27255  
Raleigh, NC 27611-7255  
(919) 733-7173  
Fax: (919) 715-8047

**Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

**FILED BY:**

Candidate Name: Chris Smithson

Treasurer Name: Chris Smithson

Treasurer Address: 920 N Saylor St

(include city, state, & zip) Southern Pines, NC 28387

Treasurer Phone: 910-692-9766

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

7-15-11  
Date Signed

Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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**Confidential**

**Certification of Financial Account Information**

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

**FILED BY:**

Committee Name: Smithson for Mayor  
 Treasurer Name: Chris Smithson  
 Treasurer Address: 920 N. Saylor St  
 (include city, state, & zip) Southern Pines, NC 28387  
 Treasurer Phone: 910-692-9766

I certify that the information provided below is true and accurate. I am providing all account information for the above named Committee. These account numbers include all bank accounts utilized, credit card accounts, money market or savings accounts, or any other financial account used for any purpose by the Committee.

The information provided on this form is considered confidential and is not subject to public disclosure. The information provided would only be used for the purposes of an audit or investigation or as required by a court of competent jurisdiction. It will be necessary to assign each account number a "account code" in order to provide account information on required disclosure reports. If an account number is used as the "account code", confidentiality of the account number is presumed to have been waived.

The treasurer shall maintain all moneys of the political committee in a bank account or bank accounts used exclusively by the political committee and shall not commingle those funds with any other moneys.

Type of account	Financial Institution	Address	Account Number	Account Code
Checking	SEC U.	15-501, Southern Pines	[REDACTED]	1

By signing this statement, I authorize agents of the State Board of Elections to inspect all accounts provided.

7-15-11  
 Date Signed

[Signature]  
 Signature of Candidate or Treasurer

In lieu of providing account information, I certify that this committee will not raise or spend any money except for the filing fee. (Only candidates may choose this option.)

\_\_\_\_\_  
 Date Signed

\_\_\_\_\_  
 Signature of Candidate or Treasurer



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**Certification of Threshold**

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

**FILED BY:**

Committee Name: Smithson for Mayor  
Treasurer Name: Chris Smithson  
Treasurer Address: 920 N Saylor St  
(include city, state, & zip) Southern Pines, NC 28387

Treasurer Phone: \_\_\_\_\_

Check One:  
 I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.  
**THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.**

I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

7-15-11  
Date Signed

[Signature]  
Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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State Board of Elections  
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(919) 733-7173  
Fax: (919) 715-8047

**Candidate Designation of Committee Funds**

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the nine allowable methods outlined in 163-278.16B(a).

Candidate Name: Chris Smithson

Committee Name: Smithson for Mayor

Treasurer Name: Chris Smithson

If Candidate is own treasurer, designate an agent to carry out designations: Mary Smithson

Committee ID #: \_\_\_\_\_

Level Registered: [State] [County] If county, specify: Municipal

I, Chris Smithson, hereby direct that in the event of my death or incapacity all  
(Name of Candidate)  
funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).

Name of Entity (Select from §163-278.16B(n))	Plan for Disbursement (eg. Amount or %)
1. <u>Kiwanis Club of the Sandhills</u>	<u>100</u>
2. _____	_____
3. _____	_____

By signing this form, I certify that the foregoing entities are eligible beneficiaries under N.C. Gen. Statute 163-278.16B(a). A copy of this form should be maintained with the Committee records.

Signature of Candidate: [Signature]

Date: 7-15-11

Note: This Designation is to be filed with the Election Board where the committee's campaign reports are filed.



7/03/2011

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**Certification of Threshold**

This Certification is used by Candidate and Party Committees only, to declare or withdraw the committee's intent to raise or spend under \$1,000 in the current election cycle.

**FILED BY:**

Committee Name: Smithson for Mayor

Treasurer Name: Chris Smithson

Treasurer Address: 920 N Saylor St

(include city, state, & zip) Southern Pines, NC 28387

Treasurer Phone: 910-692-2571

Check One:

I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports.

**THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.**

I am withdrawing my Certification to remain under the \$1,000 threshold. I will now be required to file the next scheduled report for all contributions and expenditures that have not been previously reported from the beginning of the current election cycle. I further agree to file all future reports required.

11-2-11  
Date Signed

Signature

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.